

STATE OF NEW HAMPSHIRE

Statement of Receipts and Expenditures
(RSA 664)
6-Month Report for

6-Month Report for POLITICAL COMMITTEES After 2006 General Election

Chairperson, and I, Marlene DeChane

,Dennis_Vachon_ (print name)					(print name)
Treasurer of the Democr	ats for NH Hou	se - Straf í	ord Dist	rict 3 PAC	
Committee, located atp	O. Box 328, N (mailing addr	orthwood, I	TH 03261 (town/cit	• •	(zip code)
which was registered for the	ne 2006 State Prima	y and General	Election, do	submit the fol	lowing report of receipts and
expenditures.					
6-M	SUMMARY OI ONTH REPOI	RECEIPT RT AFTER	TS AND I 2006 GE	EXPENDIT NERAL E	TURES LECTION
Date of Report:	May 7,2007	≅x	November	7, 2007	
1) Surplus or deficit broug	ght forward from las	t report		1)	\$_303.90
2) Total of all receipts sin brought forward from Ge	nce last report if a de	eficit was	·	2)	\$
3) Total of all expenditus brought forward from Ge	neral Election			3)	\$ 0
4) Balance if SURPLUS	RE	CEIV	ED	4)	\$÷_303.90
5) Balance if DEFICIT Signature of Con	NE N	MAY 8 1 2 EW HAMP HETARY E	SHIRE	5) Lene M Signature of T	10e Chase

RSA 664:6,7. Any political committee which has any outstanding debt, obligation or surplus following the election shall file reports at least once every 6 months thereafter until the obligation or indebtedness is entirely satisfied or surplus deleted, at which time a final report shall be filed.

Secretary of State's Office, State House, Room 204, Concord, New Hampshire 03301 Phone: 603-271-3242 -- Fax: 603-271-6316 -- http://www.sos.nh.gov email: elections@sos.state.nh.us

JUN-01-2007
15:09
SECRETARY OF
F STATE

2007

Place of Business

If contribution or aggregate contribution

and

is over \$100 list:

Occupation

Reporting period ending

Aggregate*
Contributions

to Date

otal of receipts unitemized	1 (\$25 or under) in this report \$						
ITEMIZED EXPENDITURES		***Indicate to which election expenditure applies					
aid to Whom	Post Office Address	Amount of Expense	Date of Expense *	**Primary O	/General	Nature of Expenditure	
and to whom				 - - -	0		
				0	<u>o</u>		
				<u> </u>	0		
				 0	0		
					O		
				o	0		
				<u>O</u>	- 0		

Candidate or Committee Name:

Amount of

Contribution

Date

Received

TOTAL P.02

Page of Pages

Post Office Address

ITEMIZED RECEIPTS

Full Name of Contributor

(Alphabetical Order)